## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10659510

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			10				Γ	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	// minus 20=		*		ſ	X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 = *			· .		X42=		OR	X84=	
ΜU	LTIPLE DEPEN	DENT CLAIM P	RESENT				l	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	TOTAL		OR	TOTAL	
	C	I AIMS AS A	MENDED - PART II					IOIAL		UH	OTHER	THAN
		(Column 1)	(Column 2			(Column 3)	SMALL ENTITY			OR	SMALL	
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≃		OR	X\$18=	
	Independent	*	Minus	***	- 01 0104	<u> -</u>		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
reel inclan								TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE	
$\geq$	(Column 1) (Column 2) (Column 3)										ADDII.1 221	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* Minus *** NTATION OF MULTIPLE DEPENDENT		CLAIM	<u> -</u>		X42≈		OR	X84=		
THIS THESENIATION OF MOUTHFUL DEFENDENT CLAIM								+140=	!	OR	+280=	
							A.	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	independent	*	Minus	***	<u>-</u>	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		<del> </del>	+140=				
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE ADDIT. FEE												
	The "Highest Num	ber Previously Pai	id For" (Total o	r Independ	ent) is the	e highest number	r found	d in the app	ropriate box	in col	umn 1.	